

The Confrontation with Death¹

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The title of this symposium is, from one point of view, catchy and expressive. But from a deeper point of view it is not accurate. We are not talking about "illusions", nor are we talking about "immortality." We are here to understand why human beings do not take obvious steps to preserve their health, when it is in their best interest to do so. Our problem is the dilemmas associated with mortality. Broadly speaking, it is the problem of slow suicide; or, stated differently, why do human beings live in such a way that they court death, invite death? What is to them the attractiveness of death? We assume that people obviously ought to want to live longer; why do they court their own destruction?

To understand this topic we must go beyond our usual logic, beyond our simple rationality. The topic takes us into the field of paradox—which, if I may say so, is the field *par excellence* of the psychoanalyst.

PEOPLE EXIST IN PARADOXES

Human beings are paradoxical creatures. This inheres in the structure of consciousness. To think *yes* means to think also *no*. Men and women are reflexive. This is why you never can draw a direct parallel between animals and human beings. The human being can know that he is responding and this capacity for awareness changes his responding. The reflexive nature of the human being produces the great achievement we call culture. It also makes possible the necessary symbolic thinking, or as the psychologists call it, cognitive interpretation. Consciousness and unconsciousness often operate in opposition to each other—my conscious ideas are paired with unconscious ones which keep the balance by being against what I think consciously. This is a point made by C. G. Jung. If the accepted ways are too rational, there erupts from the unconscious a concern with the occult, with horoscopes, with sorcery, and with irrationality as a balance.

Shakespeare expresses this affinity for paradox beautifully in four lines concluding one of his sonnets:

Ruin hath taught me thus to ruminate:
That time will come and take my love away.
This thought is as a death that cannot choose
But weep to have that which it fears to lose.

Now, as well-conditioned children of our society, we would logically ask, why does he "weep to have" his love? Why can he not enjoy what he has? Thus our logic pushes us always toward adjustment—and adjustment in our time is to a

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crazy world and to a crazy life. In whatever age we thus cut ourselves off from understanding the profound depths of human nature which Shakespeare is expressing in his poetry.

You and I have also felt such paradoxes, but we generally cover them up. We see an autumn tree so beautiful that we feel like weeping. We hear music so lovely that we are overcome with sadness. The craven thought then appears: it would be almost better not to have heard the music or to have seen the tree, for we know it will die ("time will come and take our love away").

But the essence of being human is that we can love in such brief moments. Though we know that time and death will come to claim us all. We often yearn to stretch the brief moment—to postpone the time when we will be claimed. But this is a highly frustrating struggle and it is also bound to be a losing battle.

These paradoxes can be seen most vividly in the area of health. We see people jaywalking on all sides, challenging life and death. Another example is people's great concern with the minute, piddling matters of health, while, at the same time, they ignore serious warnings. It is as though they wanted to die.

Something is occurring parallel to Dostoyevsky's Grand Inquisitor. Just as "freedom" is too great a burden for people to bear, according to Dostoyevsky, so health is also. People court ill-health. The flu and the common cold give many persons a rest without guilt; they can stay in bed for a few days, their business and the world getting along without them. What are we going to do when the cures are found for such ailments and we'll have to go to work every day in the year?

One immediate conclusion is that we cannot depend simply on the sheer *will to live*. There's also a will to die, which Freud called the death instinct. However we phrase it or qualify it, it still remains a challenge to our thinking which draws us to a deeper level than merely the question of good health.

Death is the constant companion of human beings, whether it is recognized or denied. Death is not the opposite to life, but a continuous parallel; one could not exist without the other. When you are born into life the possibility of death begins simultaneously.

The individual must come to terms with this companion. Ideally, he must learn to live with the knowledge that he will die. If he can do this consciously he will find that his life is characterized by more abandon and courage.

It has been the function of great religions to help people live with the immediacy of the fact of death without being afraid of it. But in our century we repress the awareness of death, as the Victorians did sex; then death comes out in our unconscious behavior. We see this in jaywalking, smoking endlessly, and other ways of defying death.

Death is the fateful and ultimate symbol of the human being's powerlessness and helplessness. We know as human beings that our death is certain—we have a word for that; but our helplessness is assured by never knowing when. The human being has to assess his strength against his helplessness. One common way is a defiance of death. The "hot flyers" in World War II got themselves killed because of their rashness which in turn came from their being afraid of death. Persons commit suicide because they are afraid of dying; they will jump out of a lifeboat, preferring to die immediately rather than confront the perpetual uncertainty of

waiting for a rescue in the open boat. Playing "chicken" with motorcars is another example, which we do not adequately deal with merely by calling it adolescent.

It is important to see the positive aspects of these futile attempts at proving that one is not completely helpless. Otherwise we'll lose our best motive power. There is in these irrational acts a constructive element, which I will deal with presently when I discuss a new concept of responsibility for oneself. We can never develop this responsibility as long as our own life is in hock.

This defiance also occurs against the physician to the extent that the physician plays God or is made into God by the patient (as he is bound to be sometime); the physician will also be seen as the devil. This "negative transference" (as we call it in psychoanalysis) is expressed these days in promiscuous malpractice suits—anything to get back at the doctors. Probably this pattern is related to the fact, as Dr. Wynder points out, that physicians have not been flocking to the support of preventive medicine. Indeed, it seems if we can judge by their actions, that as a group they are not much interested in it.

Does it not seem clear that the position of God has its attractiveness? And is it not natural that physicians will find it consciously hard to remove themselves from the status and prestige of being the custodians of salvation and damnation in the realm of the patient's health? Also that they will not like to give up their role of dispersers of magic in their cures for diseases? True, such behavior short-circuits the goal the doctors ostensibly seek. I hope the recognition of this phenomenon will enable physicians to meliorate the problem.

Another implication for the American Health Foundation is not to tie their preventive programs too obviously to physicians and the physician's work. To the extent that they do this they will draw upon themselves this defiance of which I have spoken. This consideration also points ahead toward the matter of personal responsibility, i.e., the program must elicit this new attitude of responsibility on the part of the persons the Foundation seeks to reach.

The psychiatrist Harry Stack Sullivan used to say that the patient cannot afford to admire the therapist too much: It increases his own sense of powerlessness. In psychotherapy we have a practice which may lend some hints to the physicians of the body. When a person deliberately is doing himself harm, and we have pointed that out at length to no avail, we may then ask him, what anger or resentment is he trying to express against us, the therapist. The harmful behavior is often a way, even though a futile and irrational way, of asserting some autonomy against the therapist and/or a way of defying the therapist, the patient's parents, and God, all the way back to his own childhood.

Another important consideration for our understanding of this topic refers to our society. For most people, life is not very much worth preserving anyway. Our society is remiss in that we do not have many sound reasons for living to give human beings. We ask them to go on living; how do we know that life has joys or achievements for this person? William James once stated that we would not get rid of war until we found and made available its equivalent in moral terms, i.e., the "moral equivalent of war." The simple hedonism that infuses our culture, as one can see ad nauseum from the commercials on television, turns out to backfire. Our

society promises much more than it can deliver. The American Dream thus becomes a nightmare.

It has always been true that the sheer pursuit of satisfaction turns out to be self-contradictory. In the Hellenistic period in ancient Greece—an epoch startlingly parallel in many ways to our own—the problem of hedonism turned out, in the lectures of Hegesios in Egypt, to cause so many suicides that his speeches had to be prohibited by Ptolemy. There seems to me to be a clear relationship between hedonism and suicide. For the pursuit of satisfaction in itself turns out to be strangely dissatisfying. It gives us pause to realize that in our society general depression—which is a technical name for this ailment—is increasing and now rivals schizophrenia as the greatest of mental ailments.

The new concept of personal responsibility that I have pointed toward several times seems to me to be crucial in this discussion. I owe to a young intern in the hospital at the University of California Los Angeles, whose name I did not even know, an insight which one can't get too often. I had come in with symptoms of an illness which could have been quite serious. He stated that I must give up smoking, alcohol, tea, and coffee. When I bridled at that ascetic regime, he simply said, as he left the examining room, "It's your life."

The meaning of that phrase, it's your life, includes the assumption that I can commit suicide if I choose to and if it does not severely harm anyone else. It means that euthanasia, with whatever safeguards are necessary, shall be an accepted way of life. It means that the right to abort is precisely that, and is crucial so that children will not be brought into a life in which they will never have the basic security necessary to choose their own way of existence. It will mean that each of us has a clear degree of autonomy, so that we will not need to try to establish it by self-defeating methods of defiance.

I would change the word in our title "immortality" to a word which does not imply simply keeping on living. The poet, Marianne Moore, proposes here the term eternity. In writing a poem about death she cites the bird.

The very bird grown
taller as he sings, steels
his form straight up. Though he is captive,
his mighty singing
says, satisfaction is a lowly
thing, how pure a thing is joy.
This is mortality,
this is eternity.

THE REPRESSION OF DEATH

Death has been one of the "taboo" subjects in psychology in our culture, along with extrasensory perception, and homosexuality (until recently). These taboo subjects have one thing in common: if you take them seriously, you threaten deeply entrenched biases in our cultural beliefs. The only place where they were approached directly has been by the existentialists like Becker. Such thought has always been a gadfly to the entrenched biases of our society, and it opens up significant new areas for inquiry, particularly into the problem of death. Heideg-

ger, one of the leading existentialists, points out that death is the *one* absolute fact about life. The only thing I can know for sure, for example, is the fact that some day I shall die. Therefore, said Heidegger, death individualizes man. I do not think Heidegger had ever read the psychologist, Otto Rank, but Rank also expressed the fact that it is death that individualizes man. My death means something qualitatively different to me from what it can to you, and vice versa. No one can die for me; it is the one thing that I have to do for myself. Therefore, to know that I will die makes me experience myself as an individual, makes me stand alone. As Heidegger writes in his somewhat philosophical language: "Death is an irrelative potentiality which singles man out and individualizes him to make him understand the potentiality of being in others as well as himself, when he realizes the inescapable nature of his own death."

As soon as we look at the question of death we are struck immediately by one thing, and that is that modern Western civilization, particularly in America, has made a fetish of the *repression of death*. As in Victorian times sex was repressed, so now death and its symbolism are repressed. Death is thought of as obscene, unmentionable, pornographic, not to be talked about in polite company. We have big funeral services which seem purposed to demonstrate that, after all, the person did not die. We buy "life insurance," which, despite its euphemistic name, does not insure life at all but simply enables our heirs to be less economically burdened by our deaths. Their life can go on—ironically through *our* life insurance—as though we hadn't died. Death is viewed, also, as sex was viewed by nice Victorian women as a dirty mistake, an unfortunate plague on our universe, perhaps necessary as nature's way of getting rid of the population which our sexuality spawns, but to be ignored as much as possible.

This is an obviously unhealthy attitude toward death, and one of the results of this evasive approach has been that we look upon grief and mourning as sick. The implication is that when somebody dies it is better if you don't feel grief, or at least the less grief the better; which means in a strange kind of logic that the more you deny the fact of death, the "healthier" you are. I think that one of the important assertions of modern psychotherapy, particularly in its existential approach, is that when one has lost something genuine, whether it be a friend, a loved one, or a project that one was devoted to, mourning and grief are healthy emotions.

Freud demonstrated with respect to sexuality that when individuals and social groups consistently repressed and denied an experience which is both powerful and real, some symptoms are bound to appear. I think that the denial of death produces symptoms of lack of zest, the feeling that life is banal, empty, and vapid. Entwined in denial of death is the romantic conviction that somehow life goes on and on and on, which we call our automatic progress. Our culture runs away from death by making a cult of progress. Utopianism in our day seems to me to be a reaction by which we can keep this denial of death going. All of this assumes that the meaning of life is simply how *long* you live. If you can keep living more and more and more, then you can slide into the illusion that death is outwitted. But the irony of it is that the very prolonging of death a few more years often leads to a lingering old age of invalidism, debility, senility, and loneliness. The ironic fact that comes out of this denial is that the denial of death is also the loss of life. It

denies the reality of human existence, and is a source of a great deal of the apathy felt by so many people in our modern Western world.

The denial of death is also a source of some of the curious perversions that appear in odd ways in modern civilization. One of the astute commentators on our American civilization, Geoffrey Gorer, thinks that it is this denial of death that gives rise to the violence and the sadism that come out in our comics and our TV programs. Noting the denial of the topic of death as though death were pornographic, Gorer writes: "Nevertheless people have to come to terms with the basic facts of birth, of copulation, and of death, and somehow accept their implications; if social prudery prevents this being done in an open and dignified fashion, then it will be done surreptitiously. If we dislike the modern pornography of death, then we must give back to death—natural death—its parade and publicity, readmit grief and mourning. If we make death unmentionable in polite society—'not in front of the children'—we almost insure the continuation of the 'horror comic.' No censorship has ever been really effective."

The chief problem is that some psychologists, like Erich Fromm, quite apart from their intention, play ostrich with evil and tragedy. At one point Fromm speaks of the "valley of the shadow of death" as something to be avoided like the plague (1). The Psalmist, however, took a different view. He faced it directly, as part of the human situation, "Though I walk through the the valley of the shadow of death, I will fear no evil, for thou art with me." Fromm asks why people accept the vast preparations for nuclear war so docilely and with so little protest and gives the answer, because they "love death." I propose the exact opposite, namely that their apathy is related to the *repression* of the reality of death; we don't look at death, we believe somehow a holocaust "can't happen here," and so go on trusting that since civilization survived gunpowder and the bow and arrow, it will survive the nuclear bomb. In this same vein we repress the reality of cancer, heart disorder and other concerns of personal health. What is omitted by Fromm is the fact that those who truly are devoted to life are able to be so by virtue of confronting death.

VALUES IN THE CONFRONTATION OF DEATH

Now believing, as I do, that Gorer is correct, that the denial of death leads to perverted forms of sadism and violence—and, as I have added, breeds apathy and even lack of zest in what life one does have—then let us look toward the ways in which we may confront death constructively. When we do face the fact that we shall sometime die, we realize that mere biological survival, mere longevity of existence, is not enough. We must have values that are greater than mere biological life; otherwise our lives will be empty, no matter when we die. The ancient Greeks have much to teach us in this connection. They said in a hundred different ways, that unless one has the courage to give up one's life for some value, life itself will have no meaning. "Not life," said Aristotle, "but the *good* life is to be valued."

When the biological life itself is the ultimate value—which I believe is a deterioration of the American Dream—one feels he must hang on at all costs, and what he then settles for is a kind of death-in-life, that is to say, conformism. Conformism is

the tendency of the individual to let himself be swallowed up in a sea of collective responses and attitudes. As I see it, conformism is an actual partial death even though one's body keeps on living. It is a loss of one's awareness, the loss of one's potentialities and sensibilities, the loss of whatever characterizes one as a unique and original being. Now by this means we temporarily escape the anxiety of death, of "non-being," but it is at the price of forfeiting life. We forfeit our own possibilities; we give up our own sense of existence. As Paul Tillich has so well put it, the person gives up *being* because he is afraid of *non-being*. It is a surrendering of the meaning of life because we are afraid of death.

We also note that confronting death is *necessary for creativity*. Indeed, artists have proclaimed to us all down through the ages that creativity and death are very closely related. A biological analogy is that the baby teeth must be pushed out to make room for the adult teeth. The psychological analogy is that the adolescent must fight free of his parents. Generally he goes about this in an exaggerated way in order to be free, so that something new in himself may be born and there will be some possibility of finding a love partner of his own to depend upon outside his family.

Every original thought requires that I let something in myself go; it is to some extent a death. I cannot have a new idea except that something in my old way of thinking dies which has been tied to my security. A dying is required of this old security if something new—which may hopefully be a more sound security—is to be born. This is why artists and poets are always telling us that the recognition of death is essential to the creative act and that the creative act itself, from human birth on, is the capacity to die in order that something new may be born. The anxiety that the creative person must face is this anxiety of temporary nothingness; like the artists Mondrian or Cezanne, they cut away the old forms of art and then if they are creative, as these artists indeed were, something new is born. But it is born only if they can face the process of the destruction of the old forms and the old society. This is why the great artists, Van Gogh, Michelangelo—and Nietzsche and Kierkegaard in the field of the art of ideas—experienced such a tremendous tension of consciousness. This tension of consciousness must be borne as the stretching of the self between the process of the death of old forms to the birth of new ones, and sometimes it drives the artist to the brink of psychosis.

Even in the sexual sphere we find that sexual creativity—the procreating and the creating of pleasure, joy, a meaningful relationship—is symbolically related, in all kinds of mythology, to the act of death. It is necessary to be able to surrender, to give oneself up. This is shown biologically in the example of the queen bee and the praying mantis. The act of copulation is expressed in language that is synonymous to death. Fortunately for us human beings, literal death does not occur each time we make love, but something of that quality does occur. One cannot love unless he can let himself go, abandon himself, give himself, go through the abyss of the loss of a previous state of existence, with the hope and the expectation of new meaning in his human relationship.

The confronting of death itself, the courageous awareness of the fact that I will die, is not only the first necessary step in constructively meeting this problem, but is in itself an ennobling act. Blaise Pascal, the French scientist and philosopher of

several centuries ago, made a very penetrating observation: "Man is only a reed," wrote Pascal, "the feeblest reed in nature; but he is a thinking reed. There is no need for the entire universe to arm itself in order to annihilate him; a vapour, a drop of water, suffices to kill him. But were the universe to crush him, man would yet be more noble than that which slays him, because man knows that he dies, and the advantage that the universe has over him; of this the universe knows nothing. Thus all our dignity lies in thought." Pascal meant by this word "thought", not intellectualism, or rationalization, or abstract concepts, but rather "consciousness." He meant "the reasons of the heart," as well as "the reasons of the mind." "Thus all our dignity lies in consciousness," he proclaims: "By thought we raise ourselves, not by space and time, which we cannot fill . . . Let us strive then to think well. Therein lies the principle of morality." Pascal is saying here that the confronting of death actually *increases the intensity of human consciousness*.

When I become aware that I am but a reed, that the universe can crush me and sometime will actually crush me in my actual death, then the significance, the preciousness, the individual meaning as well as the universal meaning of my capacity for consciousness, become all the more significant to me. The awareness of death sharpens our sense of being. I know this sounds paradoxical, but I am not using the words loosely. The capacity to face death is the means by which we gain freedom. Man is the being who can know that at some future moment he will not be: he is always in a dialectical relationship with his own death. The failure to face this, is what I have called conformity: giving up one's ideas to fit into the group, becoming the organization man, adjusting by surrendering one's consciousness. But Pascal has proposed to us that there is another alternative, namely, facing the fact that I *may* not exist and certainly at some point I *will* not exist and grasping it in such a way that my experience of the moment is heightened. Then experience becomes something that is not simply automatic; it loses its vapidness and emptiness and becomes an experience of concrete self-awareness. Life takes on vitality and immediacy, and the individual can experience a heightened consciousness of himself and of the world around him.

The awareness of death also has another value, and this is that it is *the ultimate source of human humility*. The fact that you and I at some time will die puts us, in the last analysis, in the same boat with every other man, free or enslaved, male or female, child or adult. The facing of death is the strongest motive, and indeed requirement, for learning to be fellow men. No matter how much you may dislike the Russians or the Chinese, the Arabs dislike the Jews, or the Jews the Arabs, each of us knows that some day they will die as we will die. Therefore, in the long run, we are all in the same boat. This is what Theseus meant in Sophocles' play *Oedipus at Colonus* when he said: "I know that I am only a man, and I have no more to hope for in the end than you have." Death is this humanizing fact that we all as men must face. And it takes us all—whether black or white, red or brown, intelligent or stupid—beyond self-righteousness; it places us all in need of mercy and forgiveness by the others, and makes us all participate in the human drama in which no man can stand above another.

In Henrik Ibsen's last play, *When We Dead Awaken*, the chief character is a successful elderly sculptor who is now fed up and bored with life. He asks the

woman who was once his model, who had loved him but whom he would not permit himself to love, the following question: "When we dead awaken, what shall we find?" She responds in the play: "We shall find that we have never lived." This is one answer, and the one that haunts the days and nights of multitudes of people in our prosperous twentieth century and generally leads them to deny even the question of death. But if the question is not denied but faced, we can arrive at other answers to Ibsen's question. Some of these answers can be: We can know that we have loved, and that we have made friends who matter to us. We shall know that we have brought some beauty and some meaning into our lives. We shall know that we have sought not to betray our own consciousness; and when we have betrayed it, we have at least admitted this fact to ourselves. We shall know that we have tried to know our own potentialities honestly; and to some extent, at least, we have lived up to them. We have not turned a deaf ear to being, but we have listened to the call of being and have responded. When we dead awaken, then, we can hope to know that we have lived with some significance.

PRACTICAL SUGGESTIONS

I wish now to note some practical suggestions for the American Health Foundation in its campaign to help people take better care of their lives. It is obvious that I believe this can be done successfully only by confronting death. It is also obvious from the things I have already said that I believe this program of the American Health Foundation will achieve greater success if it is not tied too closely to physicians and to medicine. If it is so tied, it will attract to itself the backlash many people feel toward physicians and the practice of medicine. We must try to enlist the motivation of the defiance of the individual in realizing that his life is his own.

A second suggestion is the developing of positive models of health. Do not emphasize merely ill health and the dangers that threaten with excesses. For example, not the evils of smoking alone, but the value of health in the sense that if one gives up smoking he or she will taste food more vividly, will be able to smell more acutely, and in other ways will feel better. This is only a simple illustration of the need to develop positive models of health, rather than emphasizing the catastrophes that attend ill health.

A third suggestion is to enlist symbols on the side of the health campaign, and to use these symbols in such organizations as schools and churches. The campaign to brush one's teeth twice a day is one example of a success and it seems logical that other successes could be produced as well.

A fourth suggestion has to do with the ultimate philosophy which underlies our health campaign. I think it is important not to identify this campaign with the general hedonistic philosophy of life, prevalent in our country. Such a philosophy has no ultimate point of dedication. We need to recover some of the ideals and the values like those which characterized this country up until the first World War. Democracy then required the devotion of us all, and had certain things to give us. I have discussed how the American Dream is largely bankrupt. But I do believe it is

important to enlist the aid of the churches and other groups that ostensibly are concerned with ultimate values. The spiritual emphases of the culture—whatever requires us to think beyond our own selfish, egocentric concerns—is basic to the problem of lasting good health.

REFERENCE

1. Fromm, E. "The Heart of Man," pp. 48, 59. Harper & Row, New York, 1964.